Approved, SCAO OSM CODE: AOT

STATE OF MICHIGAN PROBATE COURT COUNTY

ACCEPTANCE OF APPOINTMENT

CIRCUIT COURT - FAMILY DIVISION		
In the matter of		
I have been appointed		of the person/estate.
2. I accept the appointment, submit to personal jurisdiction of the	=	
☐ 3. For a period ofdays from the date of not to exceed 91 days	my appointment I exclude f	rom the scope of my responsibility the
following real estate or ownership interest in a business ent	ity:	iness interest
because I reasonably believe the real estate or other prope hazardous substance, or is or has been used in an activity of		
result in liability to the estate or otherwise impair the value of		
	Date	
	Signature	
Attorney name (type or print) Bar no.	Name (type or print)	
Attorney address	Address	
City, state, zip Telephone no.	City, state, zip	Telephone no.
	Date of birth	
	Driver license no. or other iden	ntification

Do not write below this line - For court use only